Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210004650173)))



H210004650173ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

AMCA REALTY LLC

0	, <u>=</u>	Certificate of S
<u>::</u>	· ~	Certified Copy
<u> </u>	-	Page Count
22	:: 77	Estimated Char
S S		<u> </u>
띰	 	

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMCA REALTY LLC		
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v	vere filed on 12/14/21	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:	-	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		·
B. If amending the registered agent and/or registered office at agent and/or the new registered office address here:	ddress on our records, <u>enter the nan</u>	e of the new registered
Name of New Registered Agent:		FIL DEC 22
New Registered Office Address:	Enter Florida street address	2 PH 1
	Ulowida	= -

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Khalid Ahmad	7901 4TH ST N STE 300	X)Add
		ST. PETERSBURG, FL 33702	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Chanca

***************************************		<u>. </u>				
-						
				<u> </u>		
	· · · · · · · · · · · · · · · · · · ·					
						
	.					
				- · · · · · · · · · · · · · · · · · · ·		
··-				·		
	.,,					
ective date, if other than	the date of fili	ing:		(op	tional)	
reffective date is listed, the date te: If the date inserted in thi	must be specific a	and cannot be pric	or to date of filing o	or more than 90 days aft	ter filing.) Pursuan	t to 605,020 he listed a
nument's effective date on the				ining requirements, o		oc maca a
					% ≥∽	20
cord specifies a delayed effe	ctive date, but n	not an effective	time, at 12:01 a.	m. on the earlier of:	(b) The 90jh(d	2021 (SPEC 22
s filed.						Č
					L ENK E HASSEI	22
ed 12/22		2021			[75	,
\sim					H SIAI FLORI	-
	£	1			f 1 *****	
(Y) on	gan () other	horized representa	time of a manufact		

• . .

Filing Fee: \$25.00